

**COBB COUNTY HOME PROGRAM**  
**PROJECT APPLICATION - PY 2007**

**USE ONLY FOR HOME PROGRAM PROJECTS (AFFORDABLE HOUSING)**

Complete this form and **SUBMIT ONE ORIGINAL AND ONE COPY** to the Cobb County Community Development Block Grant (CDBG) Program Office **for each project** proposed for HOME funding.

**SUBMISSION DEADLINE: 5:00 P.M, FRIDAY, APRIL 21, 2006 [See Note on Page 4]**

**SUBMIT TO:** Cobb County Community Development Block Grant (CDBG) Program Office  
127 Church Street, Suite 270  
Marietta, Georgia 30060  
[Telephone: (770) 528-4600] [FAX: (770) 528-4613] [TDD: (770) 528-4614]

1. Applicant Name (Agency or Organization):
2. Applicant Agency Mailing Address:   
City:  GA Zip Code:
3. Contact Person:  Title:
4. Telephone:  FAX Number:
5. Fed. Tax ID No:  [Example 58-1111111]
6. Is Applicant currently designated as a Community Housing Development Organization (CHDO) by Cobb County?  
☐ yes ☐ no
7. Non-profit organizations which are submitting applications for Cobb County HOME funds must submit one (1) copy of their current IRS 501(c)(3) [Tax-Exempt Status] certification; Check ☐ if attached.
8. Non-profit organizations which are submitting applications for Cobb County HOME funds must submit one (1) copy of their audited financial statement for their most recent fiscal year. Check ☐ if an audit is attached; Check ☐ if an audited financial statement is attached.
9. Project Priority #  of  HOME projects submitted by your organization.
10. Total Project Cost \$  HOME Funds Requested \$
11. Type of HOME project proposed in this application: [Check a box by the appropriate letter – **Please Check Only One**].  
**Describe the proposed project, in detail, along with the Sources & Uses of Funds in an Attachment (Attachment 1) which you prepare.**
  - A. ☐ Acquisition - Homeownership Down-Payment Assistance [DPA] Program
  - B. ☐ Acquisition - Acquire Property and/or Structure for Affordable Housing
  - C. ☐ Moderate Rehabilitation - Single-Unit Homeowner-Occupied
  - D. ☐ Moderate Rehabilitation - Single-Unit Renter-Occupied
  - E. ☐ Moderate Rehabilitation - Multi-Unit Renter Occupied
    - 1) Total number of units to be rehabilitated:
    - 2) Number of units to be occupied by Low/Mod. Renters:
  - F. ☐ New Construction - Infrastructure Costs [Site Preparation, Streets, Curb/Gutter, Sidewalks, Water/Sewer, etc.]
  - G. ☐ Project Cobb [Acquisition] Costs

H. ☐ Project MINT [Acquisition] Costs

I. ☐ Special Needs Housing (limited to temporary or permanent housing for homeless persons [no emergency shelter] or for temporary or permanent housing for persons with disabilities)

Type of Special Need [Describe]:

12. Does the applicant own or have control of [i.e. option or purchase agreement] the project site described in this application?  
☐ yes ☐ no

If "Yes", provide a copy of the legal description of the property and evidence of ownership in Attachment 2

If Partnership or Corporation, Names and Home Addresses of Principals:

**FOR COMMUNITY HOUSING DEVELOPMENT ORGANIZATIONS [CHDO] ONLY:**

13. Is this a CHDO proposed project? ☐ yes ☐ no

14. If you answered "Yes" to question 13, list the details concerning the CHDO:

A. Name of CHDO:

CHDO Address:

City:  State:  Zip Code:

CHDO Telephone:  CHDO FAX:

15. Indicate Type of Financial Assistance Requested:

☐ Low-Interest Loans [3%]

☐ Deferred Payment Loan [Repayable Upon Property Title Transfer]

☐ Grant (Non-Profit Organizations or Municipalities Only)

16. A. Summary of Estimated Project Costs:

Acquisition Costs: \$

Construction Costs: \$

Rehabilitation Costs: \$

Soft Costs: \$

Total Project Costs \$

Matching Resources [25% of HOME Grant Amount]: \$

- Summary of Proposed Financing:

Owner Cash: \$

Bank Loan: \$

Other: \$

HOME Program \$

Total Financing \$

- B. Source(s) of Matching Resources and Amounts:

Source:  \$

Source:  \$

Source:  \$

**\*\*Attach as Exhibit K a complete description of the matching funds.\*\***

17. List Existing Liens Against Property:

Lien	Monthly Payment	Outstanding Balance	Years Remaining	Current Interest Rate
1 <sup>st</sup>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/> %
2 <sup>nd</sup>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/> %
3 <sup>rd</sup>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/> %

18. Describe client group you propose to serve:

19. List income range of clients to be served: From: \$  To: \$

- ☐ Very Low Income [Under 30% of MFI] \_\_\_\_%
- ☐ Low Income [Under 50% of MFI] \_\_\_\_%
- ☐ Low and Moderate Income Family [Under 80% of MFI] \_\_\_\_%

**NOTE:**

**A project proposal will be judged incomplete unless it contains the information requested in items 1-19, as appropriate for each individual applicant organization.**

For additional information on completing the project application form, please contact the Cobb County Community Development Block Grant Program Office at (770) 528-4600.

Applicant Agency Signatures/Approvals [**Application Preparer Should Not Be Same Person as Approver**]:

20. Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature/Title

21. Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_  
Typed/Printed Name & Title

22. Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature/Title

23. Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
Typed/Printed Name & Title

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### HUD Income Table

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CDBG MAXIMUM HOUSEHOLD INCOME LIMITS [COBB COUNTY, GEORGIA]  
EFFECTIVE 2/11/2005 \*  
SOURCE: U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT [HUD]

Family/Household Size	Extremely Low 30%	Low Income 50%	Moderate Income 80%
1	\$14,950	\$24,900	\$39,850
2	\$17,100	\$28,500	\$45,550
3	\$19,200	\$32,050	\$51,250
4	\$21,350	\$35,600	\$56,950
5	\$23,050	\$38,450	\$61,500
6	\$24,800	\$41,300	\$66,050
7	\$26,500	\$44,150	\$70,650
8	\$28,200	\$47,000	\$75,200
Ea. Additional member	+ \$ 1,700	+ \$ 2,850	+ \$ 4,550

Extremely Low Income = 30% of Median Household Income

Low Income = 50% of Median Household Income

Moderate Income = 50% - 80% of Median Household Income

\* MAXIMUM HOUSEHOLD INCOME LIMITS ARE REVISED ANNUALLY BY HUD.

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### Note Regarding Submission Date:

Any applications, which are not received at the Cobb County Community Development Block Grant Program (CDBG) Office by the submission deadline, will be returned to the applicant and will be considered ineligible for funding. **Received is defined as: Applications are physically delivered or mailed sufficiently early to be physically received at the CDBG Program Office by the application deadline of 5:00 P.M., April 21, 2006.** Applications received after the submission deadline cannot be fully analyzed to determine if they will be eligible under the federal laws and regulations governing the CDBG Program.

**Attachments and Exhibits: Attach the following Exhibits to your application.**

**Attachments**

Attachment 1: A detailed description of the proposed project with enough information to permit the reviewers to have a clear understanding of the project prior to any potential site visits.

Attachment 2: Legal description of property and evidence of ownership.

**Exhibits**

Exhibit A: A Pro-Forma for the first year's operation of the proposed project showing expected expenses and revenues, and amortization.

Exhibit B: Several photos showing the project, preferably front and rear views.

Exhibit C: Plats, sketches, plans, etc., showing proposed project.

Exhibit D: List of expected rehabilitation expenses, if applicable.

Exhibit E: Flow Chart and timetable for Rehab/Construction of project. Include anticipated dates for securing financing, bidding, beginning and completion rehab/construction dates, if applicable.

Exhibit F: General description of the project and its impact on the community. Include identification of the neighborhood by geographic boundaries, income range of families served, neighborhood resident reaction to the project.

Exhibit G: Describe economic impact of project. Include project-related opportunities for training and employment for low-income persons; new economic activity (i.e. increase in small businesses in community) resultant from the project; and affirmation that contracts will be awarded to firms located in or owned in substantial part by persons residing in the metropolitan area (if not, give reasons).

Exhibit H: Attach an environmental assessment of the project site [for acquisition, new construction].

Exhibit I: If homeowner or rental project, describe # of units provided, # of families to be served, anticipated rental costs to clients, scaled by household size [number of total persons in each household].

Exhibit J: If tenant-based assistance, describe # of families to be served, average assistance per family.

Exhibit K: List the sources, amounts and a description of HOME Program matching contributions, which your organization will provide to the project.